# **Application Data Sheet**

## **Application Information**

Application number::	
Filing Date::	July 16, 2003
Application Type::	Regular
Subject Matter::	Utility
Suggested classification::	
Suggested Group Art Unit::	
CD-ROM or CD-R?::	None
Number of CD disks::	
Number of copies of CDs::	
Sequence submission?::	
Computer Readable Form (CRF)?::	
Number of copies of CRF::	
Title::	METHOD AND APPARATUS FOR REAL TIME
	MONITORING OF ELECTROPLATING BATH
	PERFORMANCE AND EARLY FAULT
	DETECTION
Attorney Docket Number::	4522/00018
Request for Early Publication?::	NO
Request for Non-Publication?::	NO
Suggested Drawing Figure::	
Total Drawing Sheets::	12
Small Entity?::	NO
Latin name::	
Variety denomination name::	
Petition included?::	NO
Petition Type::	
Licensed US Govt. Agency::	

Contract or Grant Numbers::

Secrecy Order in Parent Appl.?::

**Applicant Information** 

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

NO

Given Name:: Kazimierz

Middle Name:: J.

Family Name:: Wikiel

Name Suffix::

City of Residence:: South Kingstown

State or Province of Residence:: RI

Country of Residence:: USA

Street of mailing address:: 539 Chestnut Hill Road

City of mailing address:: South Kingstown

State or Province of mailing address:: RI

Country of mailing address:: USA

Postal or Zip Code of mailing address:: 02879-7668

Applicant Authority Type:: Inventor

Primary Citizenship Country:: USA

Status:: Full Capacity

Given Name:: Aleksander

Middle Name::

Family Name:: Jaworski

Name Suffix::

City of Residence:: Warwick

State or Province of Residence:: RI

Country of Residence:: USA

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Street of mailing address:: 3900 Post Road

City of mailing address:: Warwick

State or Province of mailing address:: RI

Country of mailing address:: USA

Postal or Zip Code of mailing address:: 02886-9243

Applicant Authority Type:: Inventor

Primary Citizenship Country:: USA

Status:: Full Capacity

Given Name:: Hanna

Middle Name::

Family Name:: Wikiel

Name Suffix::

City of Residence:: South Kingstown

State or Province of Residence:: RI

Country of Residence:: USA

Street of mailing address:: 539 Chestnut Hill Road

City of mailing address:: South Kingstown

State or Province of mailing address:: RI

Country of mailing address:: USA

Postal or Zip Code of mailing address:: 02879-7668

#### **Correspondence Information**

Correspondence Customer Number:: 22910

Representative Information

Representative Customer Number:: 22910

#### **Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
Provisional		60/397,133	July 19, 2002
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### Foreign Priority Information

Country::	Application number::	Filing Date::	Priority Claimed::

#### **Assignee Information**

Assignee name::

Street of mailing address::

City of mailing address::

State or Province of mailing address::

Country of mailing address::

Postal or Zip Code of mailing address::